

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | MW | | 08/08/01 |
| O.I.P.E. CLASSIFIER | | 49 | 8/15/01 |
| FORMALITY REVIEW | MW | 920 | 09-28-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 6-26-01 |
| 2 | ✓ | ✓ | 6-26-01 |
| 3 | ✓ | ✓ | 6-26-01 |
| 4 | ✓ | ✓ | 6-26-01 |
| 5 | ✓ | ✓ | 6-26-01 |
| 6 | ✓ | ✓ | 6-26-01 |
| 7 | ✓ | ✓ | 6-26-01 |
| 8 | ✓ | ✓ | 6-26-01 |
| 9 | ✓ | ✓ | 6-26-01 |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

10/27
10/28/01